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FORTIETH

ANNUAL REPORT

OF

THE DIRECTORS

OF THE

GLASGOW ROYAL ASYLUM

*For Lunatics,*

SUBMITTED, IN TERMS OF THEIR CHARTER,

TO

GENERAL MEETING OF CONTRIBUTORS,

12TH JANUARY, 1854.

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GLASGOW:  
PRINTED BY JAMES HEDDERWICK & SON,  
Printers to the Queen.

1854.

## OFFICERS OF THE ASYLUM.

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### RESIDENT.

Physician Superintendent,  
ALEXANDER MACKINTOSH, M.D.

Medical Assistants,

<i>WEST HOUSE—</i>	<i>EAST HOUSE—</i>
JOHN LINDSAY STEWART, M.D.	Messrs. ROBERT KIRKWOOD and JOHN FERGUSON.

Superintendent of Ladies,  
MRS. MAPLESON.

Steward,  
MR. JOHN ARTHUR.

Master of Works,  
MR. DAVID WATSON.

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### NON - RESIDENT.

Surgeon,  
JOHN G. FLEMING, M.D.

Treasurer & Secretary,  
DONALD CUTHBERTSON, LL. B.

Chaplain,  
THE REV. J. R. RUSSELL.

# FORTIETH ANNUAL REPORT

## OF

## THE DIRECTORS

## OF THE

# Glasgow Royal Asylum for Lunatics.

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THE DIRECTORS, in this their Fortieth Report, beg leave to present, to their Constituents and the Public, the following statement of the affairs of the Institution for 1853; beginning, as is customary, with a return of the numbers admitted and dismissed, &c. during the year:

	Males.	Females.	Total.
Remained in the Asylum on 31st Dec. 1852,...	214	206	420
Admitted since, .....	166	153	319
	<hr/>	<hr/>	<hr/>
TOTAL,.....	380	359	739
	<hr/>	<hr/>	<hr/>
Dismissed Cured, .....	42	74	116
Dismissed Relieved, .....	55	36	91
Died, .....	35	24	59
	<hr/>	<hr/>	<hr/>
TOTAL,.....	132	134	266
Remaining on the 31st December 1853,.....	248	225	473
	<hr/>	<hr/>	<hr/>
TOTAL TREATED,.....	380	359	739
	<hr/>	<hr/>	<hr/>
Average Daily Number,.....	224	217	441
	<hr/>	<hr/>	<hr/>

Under the head of Admissions, it may be noticed that these have been more numerous this year than for several years past. And as to the Dismissions, twelve Pauper Patients were removed in one day to a Workhouse in the country, and others have been disposed of in a similar manner; but, notwithstanding, there has been a greater number of this class resident in the Institution than could be adequately accommodated within its walls; in fact the Asylum was so overcrowded for a considerable time that several Patients were obliged to sleep on the floor of the galleries, the dormitories being too full to hold them. In consequence of this state of things, it has been found absolutely necessary, with a view to the health, and even life of the inmates, and especially when pestilence is at the gates, to refuse admission to many lunatics, for whom application was most urgently made. This, certainly, was much to be regretted, but, in the circumstances, there was no other course to adopt.

At one period of the year the Female Paupers exceeded the Male Paupers in number, but latterly the Males have amounted to nearly two hundred, while the Females were only one hundred and eighty-four. It has been usual, in the history of the Institution, for the Male Patients to exceed the Females in number, and this is now again the case. At present, the East House continues crowded, and the openings occasionally created in it during the year, whether by individual or more extensive removal, have been quickly filled up by new Patients, from Parishes, from Private Houses, and from other Asylums.

A great part of the West House, that for ladies and gentlemen, has also been well filled; indeed, one division of it was, for a short time, crowded also, more especially during the first quarter of the year. Occasionally, for



gentlemen paying the higher rates of board, there has been even a deficiency of accommodation, and, in consequence, several Patients had to be placed elsewhere. The Private House continues to be occupied.

The state of the East House, in connection with the appearance of Cholera in several parts of Scotland, has engaged the earnest attention of the Directors. The Committee have caused all those parts of the interior of both Houses which are not papered or painted to be repeatedly cleaned, and to be whitewashed with Irish lime; cesspools and drains to be erected; and other important and expensive sanitary measures to be adopted. They have also been led to inquire into the propriety and the cost of erecting Iron Houses, which might serve as Cholera Hospitals; and have corresponded with the Directors of the City Parochial Board, and the Managers of the Royal Infirmary, with a view to the reception by these public Institutions of Patients labouring under Cholera, should it unfortunately break out in the Institution. At the same time a great quantity of blanketing was ordered; and requisitions for flannel, and other articles of body clothing, were promptly sent to the Inspectors of Poor, and other sureties of the Patients. The Directors, after visiting the Asylum, and examining the vacant rooms formerly occupied by several officers not now required, ordered that these apartments should be immediately prepared for the reception of quiet Patients, with a view both to thin the crowded dormitories in the meantime, and to secure provision for Cholera Hospitals, if such should be required. These rooms, it may be mentioned, are approached from both divisions of the East House by easy stairs, so as to be suitable for the accommodation of both sexes. Finally, on this head, while the Directors have

spared no expense for the welfare of the Patients, and by this means have prevented a greater liquidation of debt, they think it proper to state, as an additional and important precautionary measure, that they ordered a third or temporary Medical Assistant to be immediately appointed, in order that nothing should be left untried to prevent, if possible, any of the Patients committed to their charge, the poor as well as the rich, from being attacked by Cholera; and failing in this, that there might be constantly at hand such a staff of medical officers as would be able to give the most unremitting attention to any cases that might occur. Dr. Gavin, the Inspector-General from the Board of Health, is expected to visit Gartnavel tomorrow.

In addition to the expenditure just alluded to, the Directors will here notice that the advance in the price of provisions and other articles, and the corresponding rise in wages, have considerably crippled the resources of the Institution, and been much felt by those entrusted with the administration of its affairs.

The Directors of last year instructed the Weekly Committee to proceed with the erection of Houses, on the grounds of the Asylum, for the use of the Workmen and the other married Male Servants connected with the Institution. The Committee accordingly had plans and specifications prepared, advertised the works, and received several offers to execute these. As, however, it appeared that the cost of the proposed erections would amount to about £3,000, a sum considerably larger than had been supposed sufficient for the undertaking, when the price of materials and workmen's wages were lower, the Committee, after long and anxious deliberation, determined not to proceed with the works this year. Many

deserving persons, belonging to the Establishment, who have far to travel twice a-day *to* and *from* their work, have thus been disappointed, but it is hoped that in this matter the Directors will soon be more successful.

The Directors will now allude to the system of ventilation adopted in Gartnavel. The great importance of ventilation in such an Institution is admitted by all; and, in their visits to the Asylum, they have paid minute attention to the matter. In the course of the year, they commissioned Mr. Watson, their Master of Works, to visit several Asylums in England, and also a variety of other places, in order to observe the mode of heating and ventilating there employed, so far as to furnish them with detailed information on the subject. After full consideration, they have ordered what they deemed suitable for the health of the Patients, in these respects, to be carried into effect.

Several additions and alterations, by way of improvement, for the comfort of the Patients in both Houses, and the beautifying and cultivating of the Grounds and Policies, have been made during the year. The following may be here noticed:—

Two new Fireplaces.

Seven Arnott's Ventilators.

Nine Louvre boarded Ventilators.

One Padded Room.

Five hundred square yards of Lining put upon Walls.

One Retaining Wall, three Cess-Pools, and several Soil and other Drains built.

External Walls pointed.

New Stairs for access to private House and Granary Loft.

Sofa Chairs made for the frail and delicate Patients.



Trees planted near to the Gate, and also to the south and west of the Houses.

Additional Ground taken into cultivation, and new Walks and Roads made.

Hundreds of tons of Gravel have been laid down, and also fifty tons of Metal, besides Engine Ashes wherever required.

Several leading Drains have been cut and made on the Farm, and nine hundred and forty-three yards of Drains finished in the Garden.

Twelve tons of Lime have been put upon the Garden Grounds, and two hundred and fifty-one tons of Lime upon the Farm Grounds, while the Farm has been cultivated according to the system recommended last year by Mr. Findlay of Easterhill.

The Directors will now refer to a very pleasing circumstance, which occurred a few weeks ago. A young gentleman, much beloved by his family and friends, had been admitted from the country, labouring under an attack of acute mania. In a few months after the usual treatment of the Asylum, he became well, and, on being dismissed, went, as he was advised to do, to the coast to confirm his recovery, before joining the family circle. He, in common with his relations, was affected with warm sentiments of gratitude to the Institution, and, in proof of this, his father came to Glasgow, attended a meeting of the Weekly Committee, and in very feeling terms addressed the Directors on the necessity for and the usefulness of such Asylums, and, in particular, on the benefit which his own son had derived from his residence at Gartnavel, concluding his speech by presenting them with a handsome donation in aid of the funds. This token of gratitude, quite unexpected as it was by every one con-



nected with the Institution, though no doubt very pleasing to the Committee, they instructed their Secretary to record at length on their Minutes. The Directors take leave to add, that in their present circumstances, they would be glad to see the example set by the gentleman referred to, generally followed by the friends of wealthy Patients, who reap the benefit of the Asylum.

The Directors have to notice briefly certain changes which have taken place during the year in the Medical Staff of the Establishment.

In consequence of ill health, Dr. John Brown, who had been for nearly eight years Medical Assistant in the East House, resigned his situation, and Mr. Robert Kirkwood was appointed in his stead. Within a few days after taking up his abode in the Asylum, Mr. Kirkwood became ill of fever, and for nearly two months was unable for the discharge of the duties of his office. On these, however, he has again entered in restored health and strength.

Dr. James M'Ghie, who became Medical Assistant in the West House of the Asylum, in the summer of 1850, left it in the autumn of 1853, to fill the office of Medical Superintendent in the Royal Infirmary of Glasgow. This appointment he obtained in consideration of the ability and zeal displayed by him at Gartnavel.

The Directors, sensible of the fidelity with which he and his associate, Dr. Brown, discharged their medical duties in the Asylum, take this opportunity of expressing their hope that both of these gentlemen may be successful in the future prosecution of their important profession. Dr. M'Ghie has been succeeded in the Medical Assistantship of the West House by Dr. James Stewart. The excellent character of the latter, and of Mr. Kirkwood, the

other Assistant, encourage the Directors to expect that these recent appointments will give satisfaction to all concerned.

Agreeably to Act of Parliament, the Sheriffs, accompanied by two Fellows of the Faculty of Physicians and Surgeons of Glasgow, have as usual visited the Asylum. Of certain remits given by them, and by the Court of Session, to visit, examine, and report on the state of mind of several of the Patients, the results were invariably the same, viz. that the Patients in question were insane, and most properly inmates of the Asylum.

The Directors regret that they have been enabled to make but little progress, since their last Annual Report, in the reduction of the debt of the Asylum. This has been partly owing to the small amount of legacies and subscriptions received during the year, but chiefly to the great advance which unexpectedly took place in the price of provisions, while the board charged for the Patients has continued at the same rates as in the year preceding. It seems absolutely necessary, however, that some, at least, of these rates should be immediately raised, and the subject is therefore recommended to the early consideration of the Directors for the ensuing year.

Notwithstanding the untoward circumstances now alluded to, the interest of the debt, amounting to £1,702 8s. 11d. has been punctually settled, and the principal sum has been reduced to the extent of £500.

The Directors gratefully acknowledge receipt of the only legacy which has been paid to them during the past year, viz. £100, under deduction of the duty of 10 per cent. left to the Institution by Mrs. Mary Brash, widow of Mr. Hugh Shaw, manufacturer in Manchester, and niece of the late Mr. James Brash, long a respectable bookseller in this City.



Amongst a multitude of bequests of unexampled liberality, for a great variety of charitable and benevolent purposes, the late Mr. Ewing of Strathleven, by a legacy of £2,000, has left the Asylum a very gratifying token of his remembrance. Mr. Ewing was an early benefactor to its funds, his subscription of £21 having been received so long ago as June 1809, a considerable time before the foundation-stone of the former Asylum was laid; and he was one of its Directors for fourteen consecutive years, from 1815 to 1828 inclusive, during which time his great attention to its interests, his general intelligence, and excellent talents for business, were of much value in conducting its affairs. His example, it is hoped, will speedily be followed by others who, like him, may have it in their power, when arranging their testamentary provisions, to benefit an Institution indispensably necessary for relieving one of the saddest of the afflictions to which frail humanity is liable. It is almost needless to add, that much of the original plan of the buildings, from want of means, yet remains to be completed, and that in their present state, from the pressure of the existing debt, the Directors have it not in their power to render the accommodations of the Asylum accessible, on more moderate terms than those hitherto charged, to its unfortunate inmates, and especially to those from the humbler ranks of society.

The Directors would now, in conclusion, present their best thanks to the members of the Weekly Committee, for their unwearied attention to all the interests of the Institution, and, while doing so, would record the fact of the Weekly Meetings having never wanted a quorum for the despatch of the Asylum business. They would also present their acknowledgments to the thirteen gentlemen who have acted in the capacity of House Visitors, for their



labours in performing the delicate and important duty entrusted to them, during the past year; and, finally, the Directors thank the Medical and Surgical Officers, Treasurer and Secretary, Chaplain, the Superintendent of Ladies, and other officers, for their services, during the same period.

A C C O U N T

OF THE

Treasurer's Receipts and Disbursements,

FOR THE YEAR 1853.

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**R E C E I P T S.**

Balance in Treasurer's hands, per last year's Account,.....	£4	9	2
Subscriptions and Legacies, per annexed List,.....	110	7	6
BOARD OF PATIENTS, viz.			
Recovered of Board for 1853,.....	£12,543	15	2
Do. of Arrears, per last Account,.....	679	16	11
			13,223 12 1
Advances for Patients in 1852, recovered in 1853,.....	326	9	11
Proceeds of Farm Produce, &c. sold,.....	281	7	2
National Bank, Interest on Deposit Account,.....	15	11	0
Union Bank, Do. Do. ....	23	1	2
Drawn from National Bank,.....	60	0	0
Do. Union Do. ....	65	0	0
			£14,109 18 0

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**D I S B U R S E M E N T S.**

HOUSE EXPENSE, viz.

Butcher Meat,.....	£1,828	15	4
Meal, Barley, Peas, Salt, &c. ....	522	18	0
Flour, and Baker's Wages,.....	817	15	9
Groceries,.....	476	4	2

*Carried forward,...* £3,645 13 3

	<i>Brought forward</i> ,...	£3,645	13	3
Milk,.....		312	18	6
Butter and Cheese,.....		293	6	2
Potatoes,.....		104	3	5
Eggs, Fish, and Poultry,.....		239	5	7
Medicines,.....		75	12	3
Coal and Coke,.....		516	12	5
Gas-light and Candles,.....		184	6	5
Soap and Soda,.....		146	9	8
Water Rent,.....		155	7	3
Wine, Spirits, Porter, Ale, and Beer,.....		419	8	11
		<hr/> £6,193 3 10		
SALARIES, viz.				
Physician, .....	£500	0	0	
Deduct, Fees received,.....	307	13	0	
		<hr/> £192 7 0		
Treasurer and Secretary,.....	300	0	0	
Medical Assistant,.....	95	15	4	
Do. ....	87	16	6	
Chaplain,.....	60	0	0	
Ladies' Superintendent,.....	100	0	0	
Steward,.....	110	0	0	
Surgeon,.....	22	0	0	
		<hr/> 967 18 10		
Wages to Attendants on Patients, and other Servants,.....	1,422	10	8	
REPAIRS AND IMPROVEMENTS, viz.				
Tradesmen's Wages,.....	£457	16	11	
Timber,.....	133	10	2	
Carting,.....	53	4	11	
Painting,.....	80	2	2	
Plastering and White-Washing,.....	71	3	2	
Ironmongery,.....	44	13	11	
Stones, Road-Metal, and Ashes,.....	42	14	11	
Miscellaneous,.....	135	15	6	
		<hr/> 1,019 1 8		
Furniture,.....	969	17	3	
Outlays for Patients during Quarter ending 31st December } 1853, yet to be recovered,..... }	414	18	8	
Expended on Garden,.....	110	5	10	
Do. on Farm,.....	271	9	6	
MISCELLANEOUS CHARGES, viz.				
Assessed Taxes, Income-Tax, Poor-Rates, &c.	£205	7	7	
Books, Periodicals, and Stationery,.....	97	17	3	
		<hr/>		
	<i>Carried forward</i> ,...	£303	4	10
		£11,369	6	3



<i>Brought forward, £303</i>			4	10	£11,369	6	3
Printing, Printing Materials, and Advertising,	40	7	7				
Postages and Incidents,.....	32	11	2				
Insurance,.....	39	3	8				
Tolls, Carriage Hires, and Stabling,.....	38	14	5				
Hire of Rooms for Directors' Meetings,.....	7	12	6				
Subscriptions to Reading Club, and Stirling's } Library,.....	7	7	0				
Delivery of Letters and Parcels at Gartnavel,...	5	0	0				
For taking charge of Parcels,.....	12	0	0				
Repairing Carriage and Saddlery,.....	24	18	0				
Price of two Horses,.....	81	0	0				
Measuring Plans,.....	6	6	0				
Miscellaneous,.....	44	0	5				
					642	5	7
Interest on Credit Account with Union Bank,.....					751	15	4
Do. Do. with National Bank,.....					989	5	9
National Bank, farther in part Loan,.....					500	0	0
					£14,252	12	11
Amount of RECEIPTS, as above,.....					£14,109	18	0
Do. DISBURSEMENTS, do. ....					14,252	12	11
Balance due to the Treasurer,.....					£142	14	11

# ABSTRACT

OF

## The Property and Debt of the Asylum,

AT 31ST DECEMBER 1853.

### PROPERTY.

BOARD of PATIENTS, yet to be recovered, viz.

Arrears, per last year's Report,.....	£968	15	4
Deduct, recovered in 1853,.....	679	16	11
	<hr/>		
	£288	18	5
Arrears of Board for 1853,.....	444	0	4
	<hr/>		
		£732	18 9
Advances for Patients, yet to be recovered,.....	414	18	8
Price of Ground, .....	10,185	0	0
Expenditure on Buildings and Grounds,.....	60,747	5	4
Original Cost of New Furniture, .....	5,018	2	2
	<hr/>		
		£77,098	4 11
	<hr/>		

### DEBTS.

Balance due to the Treasurer, per preceding Account,.....	£142	14	11
National Bank, on Credit Account, per last	} £23,000	0	0
year's Report,.....			
Deduct paid to Account,.....	500	0	0
	<hr/>		
		22,500	0 0
Union Bank, on Credit Account, do.....	15,000	0	0
	<hr/>		
		£37,642	14 11
	<hr/>		
Amount of PROPERTY, as above,.....	£77,098	4	11
Do. of DEBTS, do. ....	37,642	14	11
	<hr/>		
Balance in favour of the Institution,.....	£39,455	10	0
	<hr/>		

# LIST

OF

## Subscriptions and Legacies,

RECEIVED IN 1853.

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Executor of Mrs. Mary Brash, Widow of Hugh } Shaw, Manufacturer, Manchester, a Legacy,... }	£100	0	0
Less Legacy-Duty, 10 per Cent.....	10	0	0
	<hr style="width: 100px; margin-left: 0;"/>	£90	0 0
A Friend in Ayrshire, a Donation,.....	9	1	6
Dr. Allen Thomson, Glasgow College, a Donation,.....	5	5	0
“ One who was a short time in the Asylum,” a Donation,.....	5	0	0
Alexander Galloway, Land-Agent, Glasgow, Annual Subscription,	1	1	0
		<hr style="width: 100px; margin-left: 0;"/>	
		£110	7 6
		<hr style="width: 100px; margin-left: 0;"/>	





REPORT  
BY  
THE PHYSICIAN SUPERINTENDENT,  
TO THE DIRECTORS,  
FOR 1853.

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IN reviewing the medical history of this Asylum for the past year, the first point which claims our attention, is one of very considerable importance, more particularly as it relates to the provision for the suitable accommodation of pauper lunatics. I allude to the remarkable increase of cases of lunacy, in the west of Scotland especially, by which all the accommodation, good, bad, or indifferent, has been called into requisition for their reception. When we take into consideration the moderate allowance which Parochial Boards give for the maintenance of lunatics in this kingdom, and the cost of keeping them properly, it is reasonable to conclude that suitable accommodation and comforts, qualified attendants, and such an amount and kind of diet and extras such as lunatics require can hardly be provided without loss.

The public Asylum (this one) for this class of Patients; the licensed rooms set apart for the insane in Workhouses, private Asylums, and other houses converted into places of security and dignified with the name of Asylums, we

are told are all full; and that, in consequence of this state of things, a Parish in the vicinity has been obliged to employ a party, a few miles to the north of Glasgow, to take charge of their lunatics, at the rate of twelve shillings a-week for each. All this proves that there is still a great want of proper accommodation for lunatics in the west of Scotland.

To proceed with the Report, I shall begin with stating that several of the Statistical Tables, such as the Table of Causes, are by no means to be absolutely relied upon, for they are in many instances mere approximations to fact. The number of Patients admitted during the year was 319, being 53 more than last year. And the increase would have been greater had it not been found necessary to cease admitting Patients for the reason already specified, viz. the want of room. So great appears to be the increase of lunacy in this part of the country, that though a very great number of Patients, have been taken to Parochial receptacles whenever the parish was of sufficient population to admit of having a poors' house, the numbers in this Asylum have always, more or less, tended to increase.

Unlike epidemic diseases, such as typhus and cholera, the causes of the spread of lunacy are beyond the reach of sanitary commissioners and boards of health. They are not to be found in defective sewerage, in street nuisances, and overcrowded dwellings, at least not directly; though it cannot be denied that whatever tends to depress the vital powers and impair the health, may lead indirectly to derange the mental constitution.

The more immediate cause of the increase of lunacy is to be sought for rather in the social condition of the time in which we live. Ours is a time of great mental



activity and excitement. Men's minds are constantly on the stretch. Nor is this state of things confined to the higher and more opulent classes of society. Among the great mass of the labouring population during the past year, there has been much commotion and excitement, manifesting itself particularly in the shape of "strikes," and the like. There has been, if not war, at least rumours of war. In the increase of population, and the excitement of the times, in the varied mental emotions to which passing events have given birth, and probably to the increase of intemperance, do we look for the more immediate cause of the increase of lunacy which has characterised the past and some of the preceding years.

As usual, we find that the cases of mania exceed those of monomania, including melancholia; that the number of males exceeds that of females; and that the ratio of melancholia to mania is much higher in females than in males.

The social condition does not seem to exercise any considerable influence, as the numbers of married and unmarried are nearly equal; and, contrary to what was found last year, the married and widowed together considerably exceed the number of those unmarried.

As to the ages of Patients admitted, they range between 20 and 90. There were none under 20 years of age. Between the ages of 30 and 50, or in the prime of life, it is found that there were by far the greatest number of Patients.

With respect to the exciting causes of insanity in those admitted, the most important in point of numbers are those included under the head of "Intemperance." They are in the ratio of 1 to 5 in the whole number admitted. If there is one argument more powerful than another

against the abuse of alcoholic stimulants, it is to be found in the fact, that so large a number of the victims of intemperance become insane. Of 65 cases, 48 were males and 17 were females—or about 1 female to 3 males. The next most numerous class of cases are those included under the title “Previous Insanity.” In many of these cases there had been only one previous attack; in some they had been numerous, with intervals, longer or shorter, of perfect mental health. Some pass a portion of almost every year in the Asylum; others require to return to it after a much longer period. In this class there were 50 cases, viz. 21 males and 29 females.

The next most important set of cases are those included under the title “Hereditary.” There is no point more fully ascertained, in regard to insanity, than the fact that it is transmitted in families. It sometimes happens that two, three, or even four members of the same family are confined in Asylums at the same time; and there are some families who have at least one member constantly in confinement. From the unwillingness which the friends of Patients manifest to reveal the circumstance of the previous existence of insanity in the family, whether in the direct line or in lateral branches, the above can only be considered as an approximate estimate of the numbers of those in whom the malady is hereditary. The circumstance is very often revealed by the Patients themselves. All that can be drawn from the friends often is, the information that some relative or member of the family was nervous, peculiar, or eccentric. And many carry the delusion so far as to maintain, that even those members of the family who have required to be confined were not insane, but that their confinement was the result of temper, pride, and the like, giving rise to such irregularities



of conduct as to make them incapable of entering into society, or engaging in the active business of life.

There were 11 cases of epilepsy, and 4 of general paralysis, accompanied by mania; there were 6 arising from disorder of the menstrual functions; there were 11 arising from the puerperal condition; and there was 1 case of mania which followed a severe attack of acute rheumatism.

Without referring more particularly to the various Causes set down in the Table as having given rise to Insanity, in those admitted during the past year, we find that the physical causes very much exceed both the moral and mental ones combined, a result which does not coincide with the speculations of many eminent men on this subject, and which may, according to M. Guislain, arise from insufficiency and incorrectness of investigation, or the want of close personal intimacy with Patients. As to the latter circumstance, it is to be remarked, that a very great number are either unable or unwilling to give correct information on the subject, and that the information which many communicate is found to be manifestly and totally at variance with the truth. As to the insufficiency of investigation which is supposed to be inevitable, in the inquiries of physicians connected with large public institutions, this may be true, to a certain extent, as regards the minute psychological analysis, which is presumed to be necessary to the discovery of the moral causes, by which, in many cases, the disease has been produced.

To the practical psychologist, the physical causes of insanity are of more interest than the moral; to the speculative psychologist, the metaphysical aspect of the question possesses more charms. Such causes as rheumatism, cardiac disease, fever, menstrual disorder, disease and abuse



of the generative organs, the puerperal state, neuroses, and the strumous diathesis are of the greatest importance to the physician engaged in the treatment of the insane. But while it is of the utmost consequence to study the physical constitution, temperament, and diseases of the Patients, to ascertain the correlation of physical and mental derangements, it is also most important to study and investigate those psychical conditions which, in the opinion of some, are antecedent to, and in that of others is causative of, mental disease.

Though a Table is given, as usual, of the Occupations of those who were admitted, we do not find that one occupation predisposes more than another to insanity. The active or sedentary, the mental or physical nature of the occupation does not seem to exercise any particular influence in the production of mental disorder.

In respect to season, it does not appear, from the experience of the past year, that it exercises any influence in the production of insanity.

I shall now allude to the Cases Dismissed, and to the Deaths.

**I. CURED.**—Of 116 Patients dismissed cured, 38 males and 57 females were cases of mania; 3 males and 16 females were cases of monomania; and one male and one female were cases of dementia;—in all 42 males and 74 females.

Of the whole, 50 or about one-half were less than a month ill previous to admission, showing what all statistics prove, that recovery is most likely to occur if the Patient is put early under treatment; that the probability of recovery becomes less and less, according to the length of time during which the Patient has been ill previous to admission, till all reasonable hope disappears.

*Table 4*, under the head of those Cured, shows what we have always observed, that if recovery is not established within twelve months after admission, in the great majority of cases it is hopeless, and that if symptoms of recovery have not manifested themselves at the end of nine months, the prognosis of the case must be pronounced to be rather unfavourable.

*Table 5* shows the relation of Cures to Causes. This Table, in connection with that of the Causes of insanity in those admitted, shows the curability in respect to causes. By comparing the two, we see that there are certain forms of insanity, which, in relation to its causes, are incurable; while there are others in which the prognosis may be considered favourable. This is a branch of the statistics of insanity which is of the greatest importance to the physician. The question is constantly being put—"Is there any hope?" and according to the amount and accuracy of our information on this subject, will be our ability to give an answer to this all important question, to inspire with hope or to crush with despair.

It will be seen by the Table referred to above, that most part of the causes enumerated commenced by exciting or disturbing the functions of the brain, though not to such an extent as permanently to affect its functions; while it will be found by referring to the Table of Causes in those admitted, that there are causes which appear in that table which never appear in the table of those cured. In the former there is not found any cause which implies any serious organic lesion; while, in the latter, there appear some which indicate such an amount of organic mischief as to preclude any possibility of recovery. While such causes as mental emotions—such as anxiety, fright, grief, joy, love, and the like—produce derangement, which



by the use of the appropriate means lead to the recovery of those affected,—there are others, such as epilepsy, general paralysis, &c. which give rise to such an amount and kind of aberration as to be altogether hopeless.

There is a third class of causes, such as hereditary predisposition, previous insanity, intemperance, &c. which, while they do not preclude the hope of recovery, indicate a considerable degree of uncertainty as to its permanence, and it is found that many such cases have repeated relapses. This is more so, perhaps, in intemperate cases than in any others.

The per centage of cures upon the total number treated, upon the number admitted, and the number treated to a conclusion, has been 15, 36, and 43 respectively.

II. RELIEVED.—The number of Patients dismissed relieved was 91, viz. 55 males and 36 females. Of these, while some had derived considerable benefit, there were others who received but little, on account of their premature removal.

III. DEATHS.—The total number of deaths was 59, viz. 35 males and 24 females. The largest number from one cause was 12, which were cases of phthisis pulmonalis. The next largest number was 8 from paralysis; there were 7 from diarrhœa, and 6 from epilepsy; there are 15 included under the general designation of “exhaustion,” which consisted chiefly of those who sank under the effect of maniacal excitement, and total prostration of the vital powers. The case of death from hemorrhage, was that of a man who attempted to commit suicide before admission, and who was first taken to the Royal Infirmary, and afterwards brought to the Asylum. The hemorrhage suddenly recurred, without any farther attempt on his part, and speedily carried him off. This case is



instructive, in so far, that some months previously he was a Patient in the Asylum, and was removed by his wife, in opposition to my advice and in spite of my representations of the danger of such a measure. Shortly after the death of her husband, she herself became an inmate of the Asylum; and the malady was the result of the same cause in both cases—intemperance.

There is one case put down as resulting from suffocation by a foreign body in the œsophagus: that such was the cause in this instance is somewhat problematical. He was a paralytic, and died suddenly while eating his dinner, which consisted of minced meat. Some meat was found in the mouth and pharynx, and a probang was easily passed down the œsophagus.

There was an interesting case of a gentleman who died in the early part of the year. In a few weeks after his first admission he became much improved, in so far as the mental symptoms were concerned; the physical symptoms, however, continued to be nearly the same. He was still somewhat changeable in disposition, being at one time full of joy and hope, and at another easily depressed in spirits, and weeping. There was a childishness also about him, but his language was generally rational. Family dissensions arose. He was pronounced by one party to be quite sane; it was asserted that he had never been insane at all; and it was thought that an unnecessary stigma had been put upon the family by his confinement, and this though they knew of his extraordinary delusions and conduct, and notwithstanding several of his relatives were known to have been insane—one of them having actually been confined for several years in this Asylum. Like many an unfit person to be at large, he insisted on being allowed to leave the Institution, and, un-

der these peculiar circumstances, he was removed. The opinion of several of the leading physicians of Glasgow, men of great skill in such cases, was unheeded: nevertheless their judgment ultimately proved to be quite correct. Nothing was heard of the Patient for some time. He travelled to various parts, and at last attempted to resume business. As we anticipated, he could not do so; he gave himself up to despair, and the idea got possession of his mind, that though he had formerly found its restraint irksome to him, there was now no hope for him unless he returned immediately to the Asylum—little suspecting that there was no hope for him in this world. He wrote to me from the south of England, begging me to readmit him, and before a few days elapsed he actually arrived, unaccompanied by any one. I found him much altered for the worse. His stomach was very irritable, and continued so till his death. No solid food was retained, nor the blandest fluids sufficiently long to be either absorbed or digested. Every kind of medicine was rejected, and no measure adopted proved of any service. Life became intolerable to him; he was averse to taking anything whatever; he became excited and angry. The organs of sense, more especially those of sight and hearing, were in a very morbid condition. He saw the most horrible visions; and the sensation in his ears was, according to his own description, as if molten lead were poured into them. The *post mortem* examination showed extensive disease. The stomach was found to be pale, flabby, and anæmic, and contained a quantity of unhealthy glairy mucus, the odour of which was possessed of powerful emetic properties. In the head, the ventricles and sub-arachnoid spaces were full of serum, and an old apoplectic clot was found. Some years previously he had been affected with apoplectic symptoms.



Other instances might be given, of the improper interference of relatives in the removal of Patients prematurely, with lamentable results, but I forbear. Relations or guardians often differ in opinion, either as to the insanity or necessity for the confinement of a Patient. Every delusion and every insane act is attempted to be explained away.

I generally find that nothing short of a trial can satisfy those who take the opposite side, and when they actually remove their friend to their own house, the change in their judgment is often wonderfully speedy. It must be said, too, that these differences of opinion are found whether the Patient be poor or rich. The rich Patient, however, is much more apt to be interfered with than the poor.

While on the subject of premature removals, I may add a case, as it was the cause of the Sheriff having settled a matter which many persons thought to be of no consequence whatever. A Patient was removed before he was fit for liberty; the relative immediately afterwards applied to his Lordship to have him re-admitted on the old warrant; this the Sheriff refused to do, stating that, even in the case of a Patient who might be dismissed the moment before, a new warrant must be obtained before he could be again confined.

The per centage of deaths upon the total number treated is about 8; upon the number treated to a conclusion about 22; and upon the number admitted  $18\frac{1}{2}$ . Notwithstanding our rule to the contrary, I have felt myself obliged to admit many Patients in a dying state, some from the Highlands, and others from great distances in an opposite direction, who could scarcely be lifted from the carriage to the hall or reception-room, and who

shortly afterwards expired. It would have been cruel to have turned them away from the door, probably to die on the road, although such admissions add considerably to our number of deaths.

It will not be considered surprising, in such a large Institution as this is, and where all kinds of mentally diseased persons are received, that some of the delirious or melancholic should occasionally be found to make attempts upon their life. Such cases have occurred, but I am happy to add that they were prevented from accomplishing their purpose, and several of them became quite well.

Although no case of suicide or homicide has occurred, yet another kind of injury has happened, which it may be well to notice here. A female pauper Patient, considerably advanced in life, while walking with an attendant in the open grounds near to the Farm, suddenly sprang over the wooden paling to escape on the other side, whereby she sustained a compound fracture of both bones of the left leg. She was long in the hands of the Surgeon; but, so far as the limb was concerned, she did quite well, and is now walking about as if she had never sustained any injury.

Another case, which might have proved fatal, was prevented principally by one means. The Patient was very ill, and in his madness would have destroyed himself, by striking his head against the walls and floors of his apartment, but for the circumstance that the room was thoroughly padded. Although such cases are rare, I have no hesitation in saying that padded rooms are of essential service in a Lunatic Asylum.

The per centage of Cures upon the total number treated to a conclusion, since the opening of the Asylum in 1814,



is  $52\frac{1}{2}$ ; and of Deaths, during the same period, 16—including all those who died from typhus fever in 1847, and cholera in 1848–49, as well as other diseases.

TREATMENT.—Under this head there is little worthy of special remark. It has continued to be much the same as was indicated in last year's Report. The symptoms have been principally such, as to lead to the belief that the brain and its membranes have been the seat of slow, insidious, inflammatory affections, which, at first more acute, rapidly assume the chronic form. In many cases, the acute stage has entirely disappeared before the admission of the Patient, and the chronic and more intractable stage of the disease has manifested itself. Hence the vast importance, in a curative point of view, of having the Patient put under proper treatment before the acute has passed into the chronic stage. The instances of recovery, however, after a long course of treatment, are numerous enough to prevent us from being too hasty in giving up a prolonged case of mania as incurable. For the good of our Patients, especially, we should be slow to consign any one to the moral and intellectual grave of incurable lunacy.

The Patients during this year have, as usual, required to be well supported, some both by night and day for months at a time; tonics, such as quinine, iron, and cod liver oil, and a generous diet, with alcoholic agents, have been most liberally supplied to all classes, when necessary, for the improvement, recovery, or existence of the Patient.

There is perhaps an advantage in large, or tolerably large, Asylums for the treatment of insanity, to be found in the number of Patients associated together, where sympathies of a wider range than those that are merely domestic can be cultivated. This, however, cannot apply to every class.

To many who are convalescent, the restraint of an Asylum becomes irksome in the extreme; but when there is a large number freely associating with one another, and meeting daily—in the library, billiard-room, or drawing-room, in the bowling-green, and in the grounds of the Asylum—friendships are formed, and feelings are excited of a wholesome and salutary kind; so much so, indeed, that not unfrequently, however strange it may appear, it happens that some leave the Asylum with feelings rather of regret than pleasure. And though such feelings are considerably modified by return to the active business of life, they delight to revisit and correspond with their 'less happy friends in affliction.

In the modern and more humane treatment of the insane, there is no point more clearly established than that, in the narrow and circumscribed sphere of activity in the lunatic world, employment, both mental and physical, is of the greatest advantage, and hence the importance of devising every means of occupation calculated to amuse and to instruct. In addition to the measures of this kind, alluded to in previous Reports, there has been called into requisition, during the past year, the printing-press, which has proved most valuable to a considerable number of Patients. There has been a printing-press in this Institution since 1842, although for many years unused, and this Asylum was amongst the first, if not the first, in which this kind of employment was devised for its Patients. The first lunatic publication, "*The Chronicles of the Monastery*," was issued from it. Since then a printing-press has been deemed a necessary appendage to several other Lunatic Asylums.

In Glasgow, the latest publication of this kind is entitled the "*The Gartnavel Gazette*." It was at first



merely a manuscript publication, but was afterwards considered of sufficient importance to be put in print. This periodical appears monthly, and seven numbers have already been printed. It has no pretensions to anything but the benefit of the Patients. The effort to get it up was quite spontaneous on their part, and certainly it does them credit. The principal, if not the only projector of it, himself a Patient, at once assumed the editorship, and actually, for a season, set up the types and worked at the press, in addition to writing many of the articles, although the whole of this work was new to him. Before this gentleman left us, cured, an entertainment was given, at the desire of a large number of Patients, to do him honour, and which went off with great *eclat*. Another editor was voted as his successor, and I hope, under his management, that this journal will continue to flourish. Our great want is compositors and pressmen, for there is found to be a superabundance of literary talent within the walls of the Asylum. In the production of the *Gazette*, the labour of a good many Patients, in writing, setting up the types, and correcting, has been called into requisition. They have also printed a Catalogue of the Library of the Asylum, a large and amended edition of the Rules, other papers, and the forms necessary in the admission of Patients; and all in a style which would be creditable to any printing-office. Several of the gentlemen, whose taste for mathematics is great, were much amused in attempting to solve the chess problems which appeared in the *Illustrated News*. The study delighted them, and every one was solved.

During fine weather, several of the Patients were permitted to go a great distance from the Asylum, with and without attendants; one to the island of Arran, and

another nearly as far in a contrary direction. The bowling-green, also, proved a great source of healthy and interesting recreation to many Patients.

*Divine Service.*—It is well known that this Institution was the first in this country in which Divine service was performed, both publicly and privately. As eloquently stated by my predecessors, Dr. Balmanno and Dr. Hutcheson, spiritual instruction is essential in the treatment of the insane, and this, I may add, is the result of my own long experience. Public worship begins in the West House, where the ladies and gentlemen congregate on Sabbath at 11 A.M., and in the East House immediately after the conclusion of this service. The service is performed in the same manner as in the City Churches, excepting that it does not take up so long a time. The Chaplain, the Rev. Mr. Russell, is most punctual in his attendance, and he preaches with acceptance to many of his attentive but afflicted hearers. Family worship continues to be conducted as before; and, in addition, the Patients have access to their own Clergymen, under suitable regulations.

In this Asylum the freest access is allowed the Patients to the legal Authorities—the Sheriffs—to whom is entrusted, by the Acts of Parliament, all that concerns the confinement and proper care of Lunatics.

In addition to the personal access afforded, at the regular periods of visitation, they are allowed to correspond freely by letter unopened and unexamined, that they may communicate all their grievances, real or imaginary. In this way, not unfrequently, the Sheriffs are induced to allow to Patients the opportunity of proving their sanity, when they allege that they are not insane and unjustly deprived of their liberty. That this should



be—that the door should never be shut against any man whose liberty is invaded—that all legal redress should be patent to him, on whatever pretence his liberty is curtailed, is a maxim which can never and ought never to be gainsaid in a country such as this. The result is, that not unfrequently attempts are made by those whom we consider Lunatics to establish their sanity; and investigations of considerable length ensue. Several cases of this kind have as usual occurred; but in no instance has it been found that it would be for the benefit of the Patient that he should regain his liberty.

It is perhaps to be regretted that, while in England, there is a Psychological Journal, and more recently an Asylum Journal, in Scotland there is no proper medium for medico-legal and other investigations and papers on insanity than the ordinary periodicals. By-and-by, we hope that a series of the cases treated in this Asylum may be published, either in connection with some future Report, or in one of the journals of the day; and when a proper Inspection-room is provided, that the results of the *post mortem* examinations will be more freely given than hitherto.

Some of our time has been occupied in devising means to improve our system of ventilation.\* In the East House, where the lowest class of Boarders and Paupers are received, several of the dormitories contain 16,462 cubic feet, and in some of these there are 16, and in others 18 or 20 Patients; the average to each being 865 cubic feet. It may be stated, however, that the mass of the uncleanly and wet Patients have 988 cubic feet each at the least, while some have more. In the Male Division

\* Dr. Gavin carefully inspected the Asylum since the Report was read to the Directors.—See page 8.

the average in all the dormitories is 879, and in the Female Division 801. Fourteen of the Patients in this House have an average of 1,263 cubic feet, while the average of both Divisions is 840 cubic feet to each Patient; and even this we hope to improve upon by-and-by.

In the West House—that for Ladies and Gentlemen—the bed-rooms have a space of from 1,435 to 1,988 cubic feet each, the average being 1,792. The cubic space of one of our large galleries, which contains eleven Patients, is 25,959, or 2,360 cubic feet to each Patient, exclusive of their parlour and bed-room accommodation. These calculations have been made by Mr. Watson, the Master of Works.\*

It must be stated that, in the East House, we still require lavatories and sculleries in most of the galleries, many single sleeping-rooms, two or three additional airing courts, and apartments for infirmaries for both sexes.

I have now to present my respectful thanks to the Directors for their continued confidence.

My acknowledgments are due to Dr. Fleming the Surgeon; also to the Medical Assistants who have been attached to the Asylum during the past year. To Dr. Brown, I wish a re-establishment of good health. He was assiduous in the performance of the duties of his department, viz. to the Patients in the East House. To Dr. M'Ghie, I wish success in his new office. He, an accomplished scholar, was able, zealous, and devoted to his charge, and peculiarly qualified for the special work which he had to perform among the higher class of Patients. I need not add that I ever found both these gentlemen to be unexceptionable in their life and conversation; and to

\* The cubic contents of each room in the East House have since been painted over the doors.

their successors in office, I would only say—"Go and do likewise."\*

To Mrs. Mapleson, I also would offer thanks, for her unwearied and skilful exertions in behalf of the Ladies committed to her care. I know that she is constantly with them, and that she devotes her whole life to their welfare. The other Heads of Departments also deserve thanks.

I hope the Directors will pardon me for the length of this Report, but before concluding I must notice the good conduct and excellent appearance of the Servants, and especially the male and female Attendants, who are above the common class, and are young, active, and vigorous. They are often severely tried, several of them have suffered most painfully from the hands, feet, and teeth of the Patients, and are much to be commended for their humanity, forbearance, and tact, under arduous, trying, and difficult circumstances.

ALEXANDER MACKINTOSH, M. D.

Physician - Superintendent.

GARTNAVEL, 31st December, 1853.

\* The Directors, in January, appointed Mr. John Ferguson as third Medical Assistant. He was highly recommended to their notice, and immediately after his appointment assumed the duties of his office.



# MEDICAL STATISTICAL TABLES,

## FOR THE YEAR 1853.

### I.—GENERAL STATEMENT.

	MALES.		FEMALES.		TOTAL.
Remaining on 31st December 1852, .	214	...	206	...	420
Admitted since, . . . . .	166	...	153	...	319
	—		—		—
TOTAL, . . . . .	380	...	359	...	739
	==		==		==
Dismissed Cured, . . . . .	42	...	74	...	116
Do. Relieved, . . . . .	55	...	36	...	91
Died, . . . . .	35	...	24	...	59
	—		—		—
TOTAL, . . . . .	132	..	134	...	266
Remaining on 31st December 1853, .	248	...	225	...	473
	—		—		—
TOTAL, . . . . .	380	...	359	...	739
	==		==		==
Average Daily Number for 1853, . .	224	...	217	...	441

## II.—TABLES RELATIVE TO PATIENTS ADMITTED DURING THE YEAR 1853.

*Table 1.—Showing the Form of Insanity in those Admitted.*

	MALES.		FEMALES.		TOTAL.
Mania, . . . . .	84	...	74	...	158
Monomania, including Melancholia, .	47	...	66	...	113
Dementia, . . . . .	35	...	13	...	48
	<u>166</u>	...	<u>153</u>	...	<u>319</u>

*Table 2.—Showing the Social Condition of those Admitted.*

	MALES.		FEMALES.		TOTAL.
Unmarried, . . . . .	80	...	68	...	148
Married, . . . . .	73	...	67	...	140
Widowed, . . . . .	13	...	18	...	31
	<u>166</u>	...	<u>153</u>	...	<u>319</u>

*Table 3.—Showing the Ages of those Admitted.*

	MALES.		FEMALES.		TOTAL.
Under 15, . . . . .	0	...	0	...	0
— 20, . . . . .	11	...	8	...	19
— 25, . . . . .	11	...	15	...	26
— 30, . . . . .	25	...	21	...	46
— 35, . . . . .	30	...	25	...	55
— 40, . . . . .	18	...	19	...	37
— 45, . . . . .	20	...	18	...	38
— 50, . . . . .	19	...	16	...	35
— 55, . . . . .	11	...	14	...	25
— 60, . . . . .	8	...	7	...	15
— 65, . . . . .	4	...	6	...	10
— 70, . . . . .	5	...	1	...	6
— 75, . . . . .	2	...	1	...	3
— 80, . . . . .	1	...	1	...	2
— 85, . . . . .	0	...	1	...	1
— 90, . . . . .	1	...	0	...	1
	<u>166</u>		<u>153</u>		<u>319</u>

Table 4.—Showing the Causes of Insanity in those Admitted.

	MALES.	FEMALES.	TOTAL.
Anger, . . . . .	0	1	1
Anxiety, . . . . .	6	2	8
Coup de Soleil, . . . . .	1	0	1
Critical Period, . . . . .	0	1	1
Death of Relatives, . . . . .	2	1	3
Destitution, . . . . .	0	7	7
Disease, Bodily, . . . . .	0	2	2
Domestic Trials, . . . . .	0	9	9
Dyspepsia, . . . . .	1	0	1
Epilepsy, . . . . .	5	6	11
Erysipelas of Head, . . . . .	0	1	1
Febricula, . . . . .	1	2	3
Fright, . . . . .	1	2	3
General Paralysis, . . . . .	3	1	4
Grief, . . . . .	1	5	6
Hereditary, . . . . .	11	5	16
Ill-usage, . . . . .	0	1	1
Imprisonment, . . . . .	1	0	1
Indulgence in Opiates, . . . . .	1	1	2
Injury of Head, . . . . .	3	1	4
Intemperance, . . . . .	48	17	65
Jealousy, . . . . .	0	1	1
Loss of Law-suit, . . . . .	0	1	1
Loss of Sight, . . . . .	1	0	1
Love, Disappointed, . . . . .	0	3	3
Menstrual Disorder, . . . . .	0	6	6
Nervous Debility, . . . . .	1	0	1
Old Age, . . . . .	1	0	1
Otitis, . . . . .	0	1	1
Over Study, . . . . .	3	0	3
Pecuniary Embarrassment, . . . . .	3	1	4
Physical Over-Exertion, . . . . .	2	3	5
Previous Insanity, . . . . .	21	29	50
Pride, Excess of, . . . . .	0	1	1
Puerperal States, . . . . .	0	10	10
Quarrel, . . . . .	0	1	1
Religious Excitement, . . . . .	0	3	3
Rheumatism, Acute, . . . . .	0	1	1
Rupture of Blood-Vessel, . . . . .	0	1	1
Solitary Life, . . . . .	0	2	2
Speculations, . . . . .	3	0	3
Thwarted in Marriage, . . . . .	0	1	1
Typhus Fever, . . . . .	1	1	2
Unascertained, . . . . .	27	14	41
Unhappy Marriage, . . . . .	1	0	1
Unjust Accusation, . . . . .	1	0	1
Unknown, . . . . .	16	8	24
TOTAL, . . . . .	<u>166</u>	<u>153</u>	<u>319</u>



Table 5.—Showing the Occupations of those Admitted.

MALES.							
Advocate, . . . .	1			<i>Brought forward,</i>			77
Bakers, . . . .	3			Labourers, . . . .			10
Bank Clerks, . . . .	2			Land Agent, . . . .			1
Basketmaker, . . . .	1			Lawyers, . . . .			2
Blacksmiths, . . . .	4			Manufacturer, . . . .			1
Blockcutters, . . . .	2			Masons, . . . .			4
Boxmaker, . . . .	1			Merchants, . . . .			4
Carpenters, . . . .	3			Military Officer, . . . .			1
Carters, . . . .	2			Miller, . . . .			1
Cast-Iron Dresser, . . . .	1			Miner, . . . .			1
Cattle-Dealer, . . . .	1			No Occupation, . . . .			4
Catechist, . . . .	1			Painters, . . . .			2
Civil Engineer, . . . .	1			Pavior, . . . .			1
Clerks, . . . .	11			Pattern-Drawer, . . . .			1
Clerk of Customs, . . . .	1			Pipemaker, . . . .			1
Clergymen, . . . .	2			Plasterer, . . . .			1
Clock Pedlar, . . . .	1			Plumber, . . . .			1
Clothiers, . . . .	2			Porters, . . . .			2
Coachmen, . . . .	2			Postboy, . . . .			1
Commission Merchants, . . . .	3			Potter, . . . .			1
Cook, . . . .	1			Printer, . . . .			1
Engineers, . . . .	4			Salesmen, . . . .			2
Engraver, . . . .	1			Schoolmaster, . . . .			1
Ex-Bank Teller, . . . .	1			Sheriff-Officer, . . . .			1
Ex-Inland Revenue Officer, . . . .	1			Shoemakers, . . . .			10
Ex-West India Merchant, . . . .	1			Shopkeeper, . . . .			1
Farmers, . . . .	6			Soldiers, . . . .			2
Farm-Servants, . . . .	2			Spirit-Dealers, . . . .			5
Fishermen, . . . .	2			Students, . . . .			3
Fleshers, . . . .	5			Strolling Fiddler, . . . .			1
Footman, . . . .	1			Surgeon, . . . .			1
Gardener, . . . .	1			Tailors, . . . .			6
Grain-Merchant, . . . .	1			Tenter, . . . .			1
Grocer, . . . .	1			Warper, . . . .			1
Hammerman, . . . .	1			Watchmaker, . . . .			1
Ham-Curer, . . . .	1			Weavers, . . . .			10
Hat-Manufacturer, . . . .	1			Unascertained, . . . .			2
Hawker, . . . .	1						
	—			TOTAL, . . . .			166
<i>Carry forward,</i> . . . .	77						

FEMALES.							
Bandage-Maker, . . . .	1			<i>Brought forward,</i>			65
Bookbinders, . . . .	2			Laundress, . . . .			1
Clippers, . . . .	3			Milliner, . . . .			1
Dairymaid, . . . .	1			Music Teacher, . . . .			1
Domestic Servants, . . . .	12			No Occupation, . . . .			13
Dressmakers, . . . .	5			Sempstresses, . . . .			17
Factory-Workers, . . . .	7			Shepherd, . . . .			1
Farm Servants, . . . .	3			Staymaker, . . . .			1
French Polisher, . . . .	1			Tea-Dealer, . . . .			1
Fringer, . . . .	1			Washerwoman, . . . .			1
Governess, . . . .	1			Weavers, . . . .			2
Hawkers, . . . .	5			Winders, . . . .			3
Housekeepers, . . . .	9			Wives, . . . .			45
Innkeeper, . . . .	1			Unascertained, . . . .			1
Ladies, . . . .	13						
	—			TOTAL, . . . .			153
<i>Carry forward,</i> . . . .	65						

*Table 6.—Showing the Number of Admissions for each Month of the Year 1853.*

	MALES.	FEMALES.	TOTAL.
January, . . . . .	12	18	30
February, . . . . .	14	9	23
March, . . . . .	10	15	25
April, . . . . .	19	14	33
May, . . . . .	10	12	22
June, . . . . .	10	11	21
July, . . . . .	9	16	25
August, . . . . .	4	11	15
September, . . . . .	26	14	40
October, . . . . .	16	18	34
November, . . . . .	18	10	28
December, . . . . .	18	5	23
			— 85
TOTAL, . . . . .			— 319

### III.—TABLES RELATIVE TO PATIENTS DISMISSED CURED.

*Table 1.—Showing the Form of Insanity in those Cured.*

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	25	51	76
Monomania, including Melancholia, . . . . .	16	22	38
Dementia, . . . . .	1	1	2
TOTAL, . . . . .	42	74	116

*Table 2.—Showing the previous Duration of the Insanity in those Cured.*

					MALES.		FEMALES.		TOTAL.
Under 1 Month,	.	.	.	.	11	...	39	...	50
— 2 Months,	.	.	.	.	4	...	9	...	13
— 3 —	.	.	.	.	2	...	6	...	8
— 4 —	.	.	.	.	1	...	7	...	8
— 5 —	.	.	.	.	1	...	4	...	5
— 6 —	.	.	.	.	0	...	1	...	1
— 9 —	.	.	.	.	1	...	2	...	3
— 1 Year,	.	.	.	.	1	...	2	...	3
— 2 Years,	.	.	.	.	0	...	0	...	0
— 3 —	.	.	.	.	0	...	1	...	1
Unascertained,	.	.	.	.	21	...	3	...	24
TOTAL,					42		74		116

*Table 3.—Showing the Ages of those Cured.*

					MALES.		FEMALES.		TOTAL.
Under 15,	.	.	.	.	0	...	1	...	1
— 20,	.	.	.	.	3	...	1	...	4
— 25,	.	.	.	.	3	...	7	...	10
— 30,	.	.	.	.	6	...	9	...	15
— 35,	.	.	.	.	10	...	16	...	26
— 40,	.	.	.	.	7	...	10	...	17
— 45,	.	.	.	.	4	...	11	...	15
— 50,	.	.	.	.	7	...	7	...	14
— 55,	.	.	.	.	2	...	8	...	10
— 60,	.	.	.	.	0	...	1	...	1
— 65,	.	.	.	.	0	...	3	...	3
TOTAL,					42	...	74	...	116

*Table 4.—Showing the Length of Residence in the Asylum of those Cured.*

					MALES.		FEMALES.		TOTAL.
Under 1 Month,	.	.	.	.	1	...	5	...	6
— 2 —	.	.	.	.	5	...	14	...	19
— 3 —	.	.	.	.	6	...	8	...	14
— 4 —	.	.	.	.	7	...	8	...	15
— 5 —	.	.	.	.	3	...	7	...	10
— 6 —	.	.	.	.	6	...	8	...	14
— 9 —	.	.	.	.	8	...	7	...	15
— 1 Year,	.	.	.	.	4	...	7	...	11
— 2 Years,	.	.	.	.	1	...	7	...	8
— 3 —	.	.	.	.	1	...	1	...	2
— 4 —	.	.	.	.	0	...	2	...	2
TOTAL,					42	...	74	...	116



*Table 5.—Showing the Causes of Insanity in those Cured.*

	MALES.	FEMALES.	TOTAL.
Anxiety, . . . . .	2	4	6
Destitution, . . . . .	1	2	3
Desertion by Husband, . . . . .	0	1	1
Election Excitement, . . . . .	1	0	1
Fright, . . . . .	0	1	1
Grief, . . . . .	1	5	6
Hereditary, . . . . .	3	6	9
Ill-Usage, . . . . .	0	1	1
Indulgence in Opiates, . . . . .	0	1	1
Injury of Head, . . . . .	0	1	1
Insult, . . . . .	1	0	1
Intemperance, . . . . .	16	23	39
Joy, Excess of, . . . . .	0	1	1
Loss of Means, . . . . .	0	1	1
Love, . . . . .	1	0	1
Masturbation, . . . . .	1	0	1
Menstrual Disorder, . . . . .	0	1	1
Otitis, . . . . .	0	1	1
Over-Exertion, and Over-Study, . . . . .	1	2	3
Previous Insanity, . . . . .	9	13	22
Puerperal State, . . . . .	0	3	3
Rupture of Blood-Vessel, . . . . .	0	1	1
Unascertained, . . . . .	3	5	8
Unknown, . . . . .	2	1	3
TOTAL, . . . . .	<u>42</u>	<u>74</u>	<u>116</u>

*Table 6.—Showing the per Cent. of Cures upon the Total Number Treated; the Number Treated to a Conclusion; and the Number Admitted.*

Total Number Treated,	739	Cured, {	PER CENT. 15.69 43.60 36.36
Do. do. to a Conclusion,	266		
Admitted, . . . . .	319		

#### IV.—TABLES RELATIVE TO PATIENTS WHO HAVE DIED DURING THE YEAR 1853.

*Table 1.—Showing the Form of Insanity in those who Died.*

	MALES.	FEMALES.	TOTAL.
Mania, . . . . .	10	6	16
Monomania, including Melancholia, . . . . .	7	12	19
Dementia, . . . . .	18	6	24
TOTAL, . . . . .	<u>35</u>	<u>24</u>	<u>59</u>

*Table 2.—Showing the Ages of those who Died.*

							MALES.		FEMALES.		TOTAL.
Under 20,	.	.	.	.	.	.	0	...	2	...	2
— 25,	.	.	.	.	.	.	2	...	0	...	2
— 30,	.	.	.	.	.	.	1	...	0	...	1
— 35,	.	.	.	.	.	.	7	...	2	...	9
— 40,	.	.	.	.	.	.	2	...	1	...	3
— 45,	.	.	.	.	.	.	5	...	5	...	10
— 50,	.	.	.	.	.	.	3	...	2	...	5
— 55,	.	.	.	.	.	.	7	...	6	...	13
— 60,	.	.	.	.	.	.	1	...	2	...	3
— 65,	.	.	.	.	.	.	3	...	1	...	4
— 70,	.	.	.	.	.	.	4	...	1	...	5
— 75,	.	.	.	.	.	.	0	...	0	...	0
— 80,	.	.	.	.	.	.	0	...	2	...	2
TOTAL,							35	...	24	...	59

*Table 3.—Showing the Length of Residence in the Asylum of those who Died.*

							MALES.		FEMALES.		TOTAL.
Under 1 Month,	.	.	.	.	.	.	8	...	2	...	10
— 2 Months,	.	.	.	.	.	.	4	...	3	...	7
— 3 —	.	.	.	.	.	.	2	...	1	...	3
— 4 —	.	.	.	.	.	.	3	...	3	...	6
— 5 —	.	.	.	.	.	.	2	...	2	...	4
— 6 —	.	.	.	.	.	.	1	...	0	...	1
— 9 —	.	.	.	.	.	.	2	...	2	...	4
— 1 Year,	.	.	.	.	.	.	1	...	1	...	2
— 2 Years,	.	.	.	.	.	.	3	...	3	...	6
— 3 —	.	.	.	.	.	.	1	...	3	...	4
— 4 —	.	.	.	.	.	.	2	...	3	...	5
— 5 —	.	.	.	.	.	.	2	...	0	...	2
— 7 —	.	.	.	.	.	.	2	...	0	...	2
— 10 —	.	.	.	.	.	.	0	...	1	...	1
— 11 —	.	.	.	.	.	.	1	...	0	...	1
— 16 —	.	.	.	.	.	.	1	...	0	...	1
TOTAL,							35	...	24	...	59

*Table 4.—Showing the Causes of Death.*

	MALES.	FEMALES.	TOTAL.
Cardiac Disease, . . . . .	2 ...	0 ...	2
Cerebral Disease (Organic), . . . . .	1 ...	0 ...	1
Diarrhœa, . . . . .	3 ...	4 ...	7
Dropsy, . . . . .	0 ...	1 ...	1
Dysentery, . . . . .	0 ...	1 ...	1
Epilepsy, . . . . .	5 ...	1 ...	6
Exhaustion, . . . . .	9 ...	6 ...	15
Hæmorrhage from Wound received before Admission, . . . . .	1 ...	0 ...	1
Inanition, . . . . .	1 ...	2 ...	3
Old Age, . . . . .	0 ...	1 ...	1
Paralysis, . . . . .	6 ...	2 ...	8
Phthisis Pulmonalis, . . . . .	6 ...	6 ...	12
Suffocation, Supposed (see Report, page 29), 1	... 0 ...	1	
TOTAL, . . . . .	35 ...	24 ...	59

*Table 5.—Showing the per Cent. of Deaths upon the Total Number Treated; the Number Treated to a Conclusion; and the Number Admitted.*

Total Number Treated, . . . . .	739	Died, 59	CENT. { 7.98 22.18 18.49
Do. do. to a Conclusion, . . . . .	266		
Admitted, . . . . .	319		



V.—SHOWING THE NUMBER OF PATIENTS DISMISSED  
FOR EACH MONTH OF THE YEAR 1853.

[illegible]

VI.—SHOWING THE PER CENT. OF CURES AND DEATHS, UPON THE TOTAL NUMBER OF PATIENTS TREATED TO A CONCLUSION,

*From the Opening of the Asylum on the 12th Dec. 1814 to the 31st Dec. 1853.*

			CURED.	%CENT.
Total Number Treated to a Conclusion,	.	6,116	} 3,121	} 52.66
			DIED.	
Do.	do.	.	6,116	} 982 } 16.05

VII.—Showing the NUMBER of PATIENTS annually ADMITTED, the NUMBER who have been DISMISSED CURED, RELIEVED from its Opening, on the 12th Dec. 1814 to 31st Dec. 1853

YEAR.	ADMITTED DURING EACH YEAR.			REMAINED AT THE END OF EACH PRECEDING YEAR.			TOTAL UNDER TREATMENT DURING EACH YEAR.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
1814,.....	25	19	44	...	...	...	...	...	...
1815,.....	40	37	77	21	19	40	61	56	117
1816,.....	56	34	90	39	34	73	95	68	163
1817,.....	45	42	87	56	39	95	101	81	182
1818,.....	50	41	91	56	47	103	106	88	194
1819,.....	45	36	81	62	40	102	107	76	183
1820,.....	54	33	87	64	42	106	118	75	193
1821,.....	56	38	94	69	43	112	125	81	206
1822,.....	51	30	81	74	47	121	125	77	202
1823,.....	41	43	84	63	43	106	104	86	190
1824,.....	40	38	78	55	59	114	95	97	192
1825,.....	47	32	79	59	61	120	106	93	199
1826,.....	38	37	75	59	55	114	97	92	189
1827,.....	50	24	74	55	50	105	105	74	179
1828,.....	45	49	94	62	44	106	107	93	200
1829,.....	47	42	89	64	59	123	111	101	212
1830,.....	40	49	89	59	55	114	99	104	203
1831,.....	56	40	96	62	61	123	118	101	219
1832,.....	48	51	99	75	62	137	123	113	236
1833,.....	52	37	89	78	61	139	130	98	228
1834,.....	50	35	85	71	68	139	121	103	224
1835,.....	55	41	96	78	62	140	133	103	236
1836,.....	65	57	122	73	64	137	138	121	259
1837,.....	61	53	114	79	70	149	140	123	263
1838,.....	58	59	117	74	72	146	132	131	263
1839,.....	80	51	131	80	77	157	160	128	288
1840,.....	78	71	149	82	73	155	160	144	304
1841,.....	83	74	157	92	91	183	175	165	340
1842,.....	114	85	199	84	86	170	198	171	369
1843,.....	184	143	327	102	100	202	286	243	529
1844,.....	157	133	290	196	148	344	353	281	634
1845,.....	200	164	364	225	180	405	425	344	769
1846,.....	222	192	414	258	206	464	480	398	878
1847,.....	203	162	365	289	250	539	492	412	904
1848,.....	205	161	366	298	254	552	503	415	918
1849,.....	211	167	378	284	234	518	495	401	896
1850,.....	194	199	393	265	222	487	459	421	880
1851,.....	140	119	259	227	198	425	367	317	684
1852,.....	141	125	266	226	202	428	367	327	694
1853,.....	166	153	319	214	206	420	380	359	739
TOTAL,.....	3,593	2,996	6,589						

TOTAL AS ABOVE,..... 6,589

DEDUCT—Remain,..... 473

TOTAL NO. OF PATIENTS, 6,116

into the GLASGOW ROYAL ASYLUM, including *Re-Admissions*, and UNFIT, and the NUMBER who have DIED during each Year, with the per Cent. of CURES and DEATHS upon the TOTAL.

DISCHARGED.									DIED.		
CURED.			RELIEVED.			UNFIT.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
...	...	...	3	...	3	...	...	...	1	...	1
16	16	32	2	6	8	2	...	2	1	...	1
24	16	40	11	12	23	1	...	1	3	2	5
26	17	43	17	15	32	...	...	...	2	1	3
15	21	36	22	22	44	2	1	3	5	3	8
21	18	39	13	12	25	3	...	3	6	4	10
31	13	44	12	16	28	1	...	1	5	3	8
21	14	35	20	18	38	1	...	1	9	2	11
26	7	33	25	25	50	...	...	...	11	2	13
10	15	25	24	9	33	4	1	5	11	2	13
17	21	38	9	10	19	1	...	1	9	5	14
18	12	30	22	24	46	...	1	1	7	1	8
12	13	25	22	24	46	4	...	4	4	5	9
22	20	42	15	6	21	1	1	2	5	3	8
18	19	37	16	10	26	3	...	3	5	5	10
22	23	45	20	20	40	...	1	1	10	2	12
17	28	45	15	12	27	...	...	...	5	3	8
18	24	42	16	10	26	2	...	2	7	5	12
28	19	47	9	22	31	1	4	5	7	7	14
21	17	38	24	10	34	1	2	3	13	1	14
15	16	31	17	19	36	4	...	4	7	6	13
31	24	55	18	9	27	1	1	2	10	5	15
32	29	61	14	16	30	4	3	7	9	3	12
35	20	55	15	22	37	6	4	10	10	5	15
27	23	50	16	16	32	1	8	9	8	7	15
33	30	63	31	15	46	6	3	9	8	7	15
47	34	81	12	10	22	3	3	6	6	6	12
58	52	110	23	18	41	1	...	1	9	9	18
61	38	99	20	24	44	...	...	...	15	9	24
52	69	121	17	17	34	...	...	...	21	9	30
83	65	148	24	25	49	...	...	...	21	11	32
90	87	177	38	29	67	...	...	...	39	22	61
103	84	187	46	43	89	...	...	...	42	21	63
103	100	203	38	26	64	...	...	...	53	32	85
122	104	226	51	39	90	...	...	...	46	38	84
111	94	205	67	33	100	...	...	...	52	52	104
84	87	171	132	111	243	...	...	...	16	25	41
55	63	118	56	40	96	...	...	...	30	12	42
73	55	128	49	47	96	...	...	...	31	19	50
42	74	116	55	36	91	...	...	...	35	24	59
1,640	1,481	3,121									982

TOTAL NO. OF CURES,... 3,121

TOTAL NO. OF DEATHS,... 982

PER CENT. OF CURES,... 52.66

PER CENT. OF DEATHS,... 16.05



# QUANTITIES OF THE PRINCIPAL PROVISIONS, &c.

CONSUMED IN THE ASYLUM IN THE YEARS 1851-52-53.

	1851.	1852.	1853.	
Beef, Mutton, &c.....	5,925½...	6,483 ...	6,553	Stones.
Bread, .....	25,466 ...	31,074 ...	32,901	Loaves.
Beer,.....	609 ...	729 ...	834	Firkins.
Porter,.....	85 ...	347 ...	492	Doz. Pints.
Ale,.....	277 ...	347 ...	391	—
Tea, .....	1,265¾...	1,427¾...	1,419¾	Lbs.
Coffee,.....	533¾...	699 ...	740	—
Sugar, .....	9,421 ...	10,527 ...	11,241	—
Soap,.....	7,674 ...	7,659 ...	10,022	—
Soda,.....	2,938 ...	3,093 ...	3,557	—
Candles,.....	38 ...	36 ...	32	Stones.
Coals, Dross, and Coke,.....	1,033 ...	1,089 ...	1,241	Waggons.
Gas, .....	521,800 ..	641,000 ..	833,100	Cubic Feet.
Oatmeal,.....	415 ...	424 ...	440	Bolls.
Barley and Peas,.....	17,144 ...	17,149 ...	17,571	Lbs.
Milk,.....	5,869½...	7,129½...	7,828	Gallons.
Butter-Milk,.....	10,986 ...	10,958 ...	10,920	—
Butter,.....	4,427 ...	5,147¾...	5,552	Lbs.
Cheese,.....	1,220 ...	1,747 ...	2,247½	—
Wine, .....	59 ...	84 ...	75	Dozens.
Spirits, including Laboratory,.....	25 ...	32 ...	66	Gallons.
Potatoes,.....	35 ...	32 ...	23	Tons.
Eggs,.....	2,670 ...	3,155½...	3,453	Dozens.

## GARDEN PRODUCE, 1853.

17,136	Early and late Cab-	11½	Stones Carrots.
	bages.	43	Do. Jerusalem Arti-
27,526	German Greens.		chokes.
76,115	Leeks.	34	Lbs. Vegetable Marrows.
15,245	Early Turnips.	243¾	Pecks Peas.
1,922	Cauliflower or Brocoli	12	Do. Beans.
	Heads.	84	Pints Brussels Sprouts.
2,300	Celery Heads.		
7,881	Savoy Heads.		
139	Red Cabbages.		
203	Beet Roots.		
43	Cucumbers.		
879	Bunches Onions in		
	Summer; and		
44¾	Stones of Onions in		
	Winter.		
165	Baskets Spinage.		
448	Stones Potatoes.		
111½	Do. Parsnips.		
137	Do. Rhubarb.		
Total Value, at Bazaar prices, . . . .		£252	1 0

## FRUITS.

126½	Pints Gooseberries.
108	Do. Strawberries.
45	Do. Red and Black
	Currants.
7¾	Do. Raspberries.
198¾	Lbs. Apples.
Parsley, Horse Radish, Sweet	
Herbs, &c. Lettuces, Radishes,	
Mustard Cresses, and Kidney	
Beans, in their season.	

## PRODUCE OF THE FARM, 1853.

66 Bolls of Corn, at 20/ per Boll, . . . .	£66	0	0
450 Stones of Hay, at 60/ per Ton, . . . .	13	10	0
48 Tons 7 Cwt. 3 Qrs. Yellow Turnips, at 17/ per Ton, . . . .	41	2	0
12 Tons of Yellow Turnips, used at home, at 17/ per Ton, . . . .	10	4	0
30 Tons Swedish Turnips for the House and Horses, at } 21/ per Ton, . . . . .	31	10	0
	£162	6	0

## PRODUCE OF PIGGERIES.

Pork to Store, at various prices, 14 Cwt. 1 Qr. 17 Lbs. . . .	£33	4	9
Actual Money received for Pork sold to fleshers and others, . . . .	94	13	8
	£127	18	5

WORK DONE BY THE HORSES TO HOUSES,  
ROADS, &c.

Credit given for Money saved by the Farm, . . . .	£48	14	0
---	-----	----	---

## GROUND DEVOTED TO EACH CROP ON FARM.

11 Acres Corn,	}	Total Imperial Acres,	. . . 31
7 Do. Turnips,			
5 Do. Fallow,			
8 Do. Grass,			

JAMES DUTHIE, GARDENER.

## LADIES' WORK DONE SINCE LAST REPORT.

## PLAIN WORK.

12 Pairs Sheets made for House.	4 Dozen Night Caps for Ladies.
6 Dozen Pillow Slips do.	18 Flannel Petticoats do.
12 Bed Covers hemmed for House.	3 Satin and Silk Quilted Petticoats for do.
3 Dozen Toilet Covers do.	3 Dozen Pairs Cotton Stockings knitted for do.
12 Table Cloths do.	4 Dozen Pairs Cotton Socks knitted for Friends.
12 Tray Cloths do.	12 Pairs Woollen Stockings knitted for Patients.
12 Col. Table Covers do.	18 Slip Polka Bodies made for Patients.
3 Dozen Towels do.	2 Pairs Stays made for Patients.
3 Dozen Bolster & Pillow Slips made for House.	3 Dozen Stuff, Silk, and Muslin Aprons made.
18 Shirts for Boys, made for Patients' Friends.	24 Habit Shirts, with Collars, made.
6 Dozen Chemises for Ladies.	3 Dozen Neckerchiefs hemmed.
4 Dozen Long and Short Night Gowns for Ladies.	6 Handkerchiefs do.
3 Dozen Flannel Semets do.	6 Babies' Pinafores made.
16 Pairs Cotton Drawers	
6 Pairs Flannel Drawers.	
18 Black Stuff Petticoats for Ladies.	

## FANCY WORK.

2 Bed Covers knitted for friends.	12 Woollen Neck Comforters knitted.
2 Toilet Covers do. do.	8 Neck Ties embroidered.
1 Chair Cover worked do.	8 Purses knitted.
A Cloth Jacket embroidered, do.	2 Gentlemen's Caps knitted, for Friends.
3 Book Cushions, Patients.	6 Pairs Babies' Boots knitted.
3 Chair do. do.	Repairs of Clothing always going on.
1 Baby's Pelisse embroidered, for Friends.	12 Pairs Garters knitted.
3 Satin Aprons braided.	6 Shetland Veils knitted, for Friends.
24 Collars worked, for Friends.	8 Flower Mats worked and knitted, for Friends.
24 Knitted and Crochet Collars.	2 Shawls knitted, Friends.
36 Pieces of Crochet and Edging done.	6 Tidies netted or darned in patterns, for Friends.
1 Scarf embroidered, Friends.	
8 Pairs Slippers do. do.	
13 Pairs Sleeves knitted.	
12 Pairs Cuffs crochet and knitted.	



NEEDLE-WORK DONE BY FEMALE PATIENTS,  
IN THE EAST HOUSE, IN 1853.

Blankets hemmed,	.	.	.	.	.	.	160 Pairs.
Sheets do.	.	.	.	.	.	.	130 do.
Pairs of Drawers made,	.	.	.	.	.	.	103
Flannel Semets do.	.	.	.	.	.	.	176
Striped Shirts do.	.	.	.	.	.	.	52
Shifts do.	.	.	.	.	.	.	72
Flannel Shifts do.	.	.	.	.	.	.	24
Blue Flannel Petticoats made,	.	.	.	.	.	.	106
White do. do.	do.	.	.	.	.	.	36
Drugget do.	do.	.	.	.	.	.	114
Gowns	do.	.	.	.	.	.	124
Short Gowns	do.	.	.	.	.	.	50
Bodices	do.	.	.	.	.	.	40
Aprons	do.	.	.	.	.	.	140
Pinafores	do.	.	.	.	.	.	24
Pillow and Bolster Slips	do.	.	.	.	.	.	210
Table-Cloths hemmed,	.	.	.	.	.	.	20
Do. Napkins do.	.	.	.	.	.	.	18
Towels do.	.	.	.	.	.	.	140
Seclusion Covers quilted,	.	.	.	.	.	.	37
Stockings knitted,	.	.	.	.	.	.	18 Pairs.
Caps made,	.	.	.	.	.	.	86

The usual Repairs in Clothing, Bed and Body Linen, Stockings, &c. have been made.

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WORK DONE IN THE UPHOLSTERY DEPARTMENT.

Hair Mattresses made,	.	.	.	.	.	.	43
Straw do. do.	.	.	.	.	.	.	162
Bolster and Pillows made,	.	.	.	.	.	.	115
Feather Pillows do.	.	.	.	.	.	.	21
Do. re-made,	.	.	.	.	.	.	25
Feather and Hair Pillows made,	.	.	.	.	.	.	57

Carpets, Sofa Covers, &c. have been made and repaired.

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The Male Pauper Patients have been employed as Joiners, Blacksmiths, Tailors, Shoemakers, Gardeners, Oakum-Pickers, Farm-Servants, Servants of all Work, Labourers, &c.

## PATIENTS ARE ADMITTED

*ON THE FOLLOWING TERMS.*

### EAST HOUSE.

#### BOARD OF PATIENTS FROM PRIVILEGED

PARISHES,.....	£0	8	6	p	WEEK.
FIRST RATE FOR OTHER PATIENTS,.....	0	9	0	—	
SECOND,.....	0	15	0	—	

### WEST HOUSE.

THIRD RATE OF BOARD,.....	£1	1	0	p	WEEK.
FOURTH, .....	1	11	6	—	
FIFTH,.....	2	2	0	—	
SIXTH,.....	3	3	0	—	
SEVENTH,.....	4	4	0	—	
EIGHTH,.....	6	6	0	—	

A Fee, on admission, is paid to the Institution by each Patient at the Second rate of Board and upwards. Should the Patient remain a year or longer, the Fee is charged on the expiry of the year, and that of each succeeding year of the Patient's residence in the Asylum.

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## THE TWO FOLLOWING DOCUMENTS

*ARE IN EVERY CASE INDISPENSABLE.*

I. Warrant from the Sheriff of Lanarkshire, in terms of the Statutes 55 Geo. III. cap. 69; 9 Geo. IV. cap. 34; 4 and 5 Vic. cap. 60; which will be granted on the presentation of Certificates of Lunacy from two respectable Medical Practitioners.

II. Written Obligation for Payment of Board, as well as for due observance of the Rules of the Institution, from one or two responsible Persons resident in Glasgow; or, in the case of Parish Paupers, from an Inspector of Poor.

Forms of these Documents will be furnished by the Physician, Dr. MACKINTOSH, Royal Lunatic Asylum; or by the Secretary and Treasurer, DONALD CUTHBERTSON, Esq. 110 West George-Street.

## GENERAL REGULATIONS.

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1. The first Quarter's Board shall be paid previous to admission (except in the case of Parish Paupers), and thereafter at the beginning of the regular quarterly terms of 1st January, 1st April, 1st July, and 1st October.

2. No part of the Board, *for the first quarter*, of Patients at and above the rate of Fifteen Shillings per week, shall be returned, except in the event of death before the expiry of that period, in which case the Directors may allow a return of such proportion as they consider reasonable.

3. When any Patient is dismissed or dies during the currency of *any succeeding Quarter*, the Weekly Committee shall have power to determine, on an application being made to them for that purpose, whether any or what portion of the Board advanced, shall be refunded.

4. Patients have no claim for remuneration for their labour.

5. Every Patient must be provided with proper Apparel. An accurate List of every Article brought with the Patient must, on admission, be delivered to the Steward, or principal Attendant, to the Superintendent of the Ladies, or the Matron, according to the House in which the Patient is placed, and the Name must be fully marked on each article. If any necessary part of Dress should not be duly supplied, after eight days' intimation has been given that it is wanted, it will be furnished by the House, and the cost of it charged against the Patient.

On applying to the Physician, the Patient will be carefully and expeditiously conveyed to the Asylum, the necessary expenses being paid to the Steward by the Applicant.

Patients in the WEST HOUSE may be visited every *lawful day* between 10 and 12 o'Clock; those in the EAST HOUSE, who are not Paupers, on Mondays, between the same Hours; and Patients who are Paupers, on Saturdays, also from 10 till 12 o'Clock. Only those who are duly authorised can be admitted to visit Patients.



# LIST OF PARISHES,

*Which, by contributing the requisite Sum, in proportion to their Population, have acquired the privilege of recommending their Insane Poor for admission into the Asylum, on the same terms with those of the City of Glasgow.*

AYR.  
BALDERNOCK.  
BARONY OF GLASGOW.  
BONHILL.  
CAMPBELTON.  
CARMUNNOCK.  
CATHCART.  
CUMBERNAULD.  
GREENOCK.  
HOUSTON AND KILALLAN.  
KILSYTH.

KIPPEN.  
LANARK.  
LARBERT AND DUNIPACE.  
LESMAHAGOW.  
LOGIE.  
MONKTON AND PRESTWICK.  
NEILSTON.  
NEW-MONKLAND.  
PORT-GLASGOW.  
RENFREW.  
ROTHESAY.